

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF NORTH CAROLINA

IN RE:

BARRY ONEIL GRAVES
PO BOX 1314
MEBANE, NC 27302CASE NO. 17-10274
JUDGE BENJAMIN A. KAHN

DEBTOR

SSN(1) XXX-XX-0687

DATE: 10/11/2017

REPORT OF FILED CLAIMS

Pursuant to 11 U.S.C. §704(5), the trustee has examined the proofs of claims filed in this case and objected to the allowance of such claims as appeared to be improper except where no purpose would have been served by such objection. After such examination and objections, if any, the trustee states that claims should be deemed allowed or "not filed" as indicated below.

NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
ABSOLUTE COLLECTION SVC 421 FAYETTEVILLE ST STE 600 RALEIGH, NC 27601	\$0.00 INT: .00% NAME ID: 59368 CLAIM #: 0003	(U) UNSECURED NOT FILED ACCT: UNTS COMMENT:
ALAMANCE CO REGISTER OF DEEDS P O BOX 837 GRAHAM, NC 27253	\$52.00 INT: .00% NAME ID: 1735 CLAIM #: 0031	(Z) SPECIAL COST ITEM ACCT: COMMENT:
ALAMANCE COUNTY EMS P O BOX 29526 GREENSBORO, NC 27429	\$0.00 INT: .00% NAME ID: 69247 CLAIM #: 0004	(U) UNSECURED NOT FILED ACCT: COMMENT:
ALAMANCE COUNTY TAX 124 W ELM STREET GRAHAM, NC 27253	\$2.12 INT: .00% NAME ID: 2794 CLAIM #: 0029	(U) UNSECURED NOT FILED ACCT: 0274 COMMENT:
ALAMANCE EAR NOSE & THROAT LLP P O BOX 2 BURLINGTON, NC 27216-0002	\$0.00 INT: .00% NAME ID: 66832 CLAIM #: 0005	(U) UNSECURED NOT FILED ACCT: 1542 COMMENT:
ALAMANCE REGIONAL MEDICAL CTR 1240 HUFFMAN MILL RD BURLINGTON, NC 27215	\$0.00 INT: .00% NAME ID: 23755 CLAIM #: 0006	(U) UNSECURED NOT FILED ACCT: 3158 COMMENT:
APPLIED BANK % CAPITAL MANAGEMENT SERVICES LP 726 EXCHANGE ST STE 700 BUFFALO, NY 14210	\$0.00 INT: .00% NAME ID: 164489 CLAIM #: 0007	(U) UNSECURED NOT FILED ACCT: 1565 COMMENT:
AT&T P O BOX 105503 ATLANTA, GA 30348-5503	\$0.00 INT: .00% NAME ID: 54076 CLAIM #: 0008	(U) UNSECURED NOT FILED ACCT: 1913 COMMENT:

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
AT&T P O BOX 105503 ATLANTA, GA 30348-5503	\$0.00 INT: .00% NAME ID: 54076 CLAIM #: 0009	(U) UNSECURED NOT FILED ACCT: 1916 COMMENT:
BANK OF AMERICA P O BOX 25118 TAMPA, FL 33622	\$0.00 INT: .00% NAME ID: 33421 CLAIM #: 0010	(U) UNSECURED NOT FILED ACCT: 3936 COMMENT:
BELLSOUTH P O BOX 1262 CHARLOTTE, NC 28201	\$0.00 INT: .00% NAME ID: 2537 CLAIM #: 0011	(U) UNSECURED NOT FILED ACCT: 1913 COMMENT:
BULL CITY FINANCIAL SOLUTIONS 1107 W MAIN ST STE 201 DURHAM, NC 27701	\$0.00 INT: .00% NAME ID: 132946 CLAIM #: 0012	(U) UNSECURED NOT FILED ACCT: COMMENT:
CITY OF GRAHAM P O DRAWER 357 GRAHAM, NC 27253	\$0.00 INT: .00% NAME ID: 31589 CLAIM #: 0001	(S) SECURED NOT FILED ACCT: COMMENT: OC
CRA COLLECTIONS P O BOX 2103 MECHANICSBURG, PA 17055-2103	\$0.00 INT: .00% NAME ID: 57337 CLAIM #: 0013	(U) UNSECURED NOT FILED ACCT: COMMENT:
CREDIT ACCEPTANCE CORPORATION SILVER TRIANGLE BUILDING 25505 W TWELVE MILE RD STE 3000 SOUTHFIELD, MI 48034-8339	\$11,250.36 INT: .00% NAME ID: 165318 CLAIM #: 0030	(U) UNSECURED NOT FILED ACCT: 9789 COMMENT: OC,COD/LIF,717OR
CSDDUR P O BOX 530 DURHAM, NC 27702-0530	\$0.00 INT: .00% NAME ID: 132698 CLAIM #: 0014	(U) UNSECURED NOT FILED ACCT: UNTS COMMENT:
DIRECTV LA1/N367 2230 E IMPERIAL HWY EL SEGUNDO, CA 90245	\$0.00 INT: .00% NAME ID: 132699 CLAIM #: 0016	(U) UNSECURED NOT FILED ACCT: 4838 COMMENT:
EMPLOYMENT SECURITY COMMISSION P O BOX 26504 RALEIGH, NC 27611-6504	\$0.00 INT: .00% NAME ID: 5777 CLAIM #: 0027	(U) UNSECURED NOT FILED ACCT: COMMENT:
EQUIFAX INFORMATION SERVICES P O BOX 740241 ATLANTA, GA 30374	\$0.00 INT: .00% NAME ID: 157462 CLAIM #: 0023	(U) UNSECURED NOT FILED ACCT: COMMENT:
EXPERIAN P O BOX 2002 ALLEN, TX 75013	\$0.00 INT: .00% NAME ID: 70333 CLAIM #: 0024	(U) UNSECURED NOT FILED ACCT: COMMENT:

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
KERNODLE CLINIC P O BOX 1717 BURLINGTON, NC 27216	\$0.00 INT: .00% NAME ID: 28369 CLAIM #: 0017	(U) UNSECURED NOT FILED ACCT: 7264 COMMENT:
MIDLAND MORTGAGE CO P O BOX 26648 OKLAHOMA CITY, OK 73126	\$0.00 INT: .00% NAME ID: 37507 CLAIM #: 0018	(U) UNSECURED NOT FILED ACCT: 5011 COMMENT: COD
NC CHILD SUPPORT CENTRALIZED COLLECTIONS P O BOX 900006 RALEIGH, NC 27675-9006	\$0.00 INT: .00% NAME ID: 2930 CLAIM #: 0025	(U) UNSECURED NOT FILED ACCT: COMMENT:
NIA WOODS 1017 FRAZIER RD MEBANE, NC 27302-7564	\$0.00 INT: .00% NAME ID: 132703 CLAIM #: 0026	(U) UNSECURED NOT FILED ACCT: COMMENT:
OPTIMA RECOVERY SERVICES P O BOX 52968 KNOXVILLE, TN 37950-2968	\$0.00 INT: .00% NAME ID: 40749 CLAIM #: 0019	(U) UNSECURED NOT FILED ACCT: 6823 COMMENT:
SHELLPOINT MORTGAGE SERVICING ATTN MANAGING AGENT P O BOX 10826 GREENVILLE, SC 29603-0826	MONTHLY PMT \$324.91 INT: .00% NAME ID: 149757 CLAIM #: 0002	(H) ONGOING-SECURED ACCT: 9031 COMMENT: DT RP,CTD,EFF W/JUL 2017
SHELLPOINT MORTGAGE SERVICING ATTN MANAGING AGENT P O BOX 10826 GREENVILLE, SC 29603-0826	\$10,703.55 INT: .00% NAME ID: 149757 CLAIM #: 0032	(R) ARREARAGE-SECURED ACCT: 9031 COMMENT: ARR THRU JUN 2017,917OR
SPRINT % RPM P O BOX 768 BOTHELL, WA 98041	\$0.00 INT: .00% NAME ID: 164490 CLAIM #: 0020	(U) UNSECURED NOT FILED ACCT: 6847 COMMENT:
TIME WARNER CABLE P O BOX 40508 FAYETTEVILLE, NC 28309	\$0.00 INT: .00% NAME ID: 132708 CLAIM #: 0021	(U) UNSECURED NOT FILED ACCT: COMMENT:
TRANS UNION P O BOX 2000 CRUM LYNNE, PA 19022-2000	\$0.00 INT: .00% NAME ID: 157479 CLAIM #: 0028	(U) UNSECURED NOT FILED ACCT: COMMENT:
UNC HOSPITALS SUITE G21 211 FRIDAY CENTER DR CHAPEL HILL, NC 27517	\$0.00 INT: .00% NAME ID: 35869 CLAIM #: 0022	(U) UNSECURED NOT FILED ACCT: UNTS COMMENT:
US DEPARTMENT OF EDUCATION % NELNET P O BOX 740283 ATLANTA, GA 30374-0283	\$45,781.38 INT: .00% NAME ID: 114934 CLAIM #: 0015	(U) UNSECURED ACCT: 0687 COMMENT:
TOTAL:	\$68,114.32	

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
JOHN T ORCUTT ESQ 6616-203 SIX FORKS ROAD RALEIGH, NC 27615	\$4,300.00	ATTORNEY FEE

ANITA JO KINLAW TROXLER
500 W FRIENDLY AVE STE 200
P O BOX 1720
GREENSBORO, NC 27402-1720

NOTICE OF FILING OF REPORT OF FILED CLAIMS

The foregoing Report of Filed Claims has been filed with the Bankruptcy Court based on an audit of claims filed in the Trustee's office. The claims are allowed unless objection is made by the Debtor or other party in interest.

Any objection to a claim should be filed in writing with the Bankruptcy Court at the address below and a copy must be served on the Trustee:

Clerk, U.S. Bankruptcy Court
101 S. Edgeworth Street
P.O. Box 26100
Greensboro, NC 27420-6100

If an objection is filed, a hearing will be scheduled before the Court. The Trustee will continue making disbursements on the claims unless an objection is filed.

Date: 10/11/2017

OFFICE OF THE CHAPTER 13 TRUSTEE

By: /s/ Gayle McFarland
Clerk
Chapter 13 Office
500 W FRIENDLY AVE STE 200
P O BOX 1720
GREENSBORO, NC 27402-1720

cc: Debtor
Attorney for Debtor - Electronic Notice